

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Restoration PAC			FEC IDENTIFICATION NUMBER ▼ C C00571588		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Boulevard Design			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 23 / 2016		
Mailing Address 1320 N. Courthouse Rd. Suite 130			Amount 2000.00		
City Arlington		State VA	Zip Code 22201		Transaction ID : SE.5521
Purpose of Expenditure TV Advertising		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 23 / 2016	
Name of Federal Candidate Darryl Glenn			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought			827900.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Campaign Solutions			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016		
Mailing Address 117 North Saint Asaph Street			Amount 1500.00		
City Alexandria		State VA	Zip Code 22314		Transaction ID : SE.5523
Purpose of Expenditure Digital Advertising (production cost)		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 25 / 2016	
Name of Federal Candidate Darryl Glenn			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought			829400.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			21500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Sherry Gaskill</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 07 / 25 / 2016